

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: HANSWALTER ZENTGRAFT et al.

Title: CANCER DIAGNOSIS BY THE MEASUREMENT OF NUP88 IN BODY SAMPLES

Appl. No.: 09/684,890

Filing Date: October 10, 2000

Examiner: Stephen L. Rawlings

Art Unit: 1642

TECH CENTER 1600/2900
APR 24 2002

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APR 23 2002
TC 1700

AMENDMENT TRANSMITTALCommissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- Declaration.
- Amendment.
- The fee required for additional claims is calculated below:

Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims: 17	— 20	= 0	x \$18.00 =	\$0.00
Independents: 2	— 3	= 0	x \$84.00 =	\$0.00
First presentation of any Multiple Dependent Claims:		+ \$280.00 =		\$0.00
		CLAIMS FEE TOTAL:	=	\$0.00

- Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$110.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$400.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$920.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,440.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,960.00	\$0.00
EXTENSION FEE TOTAL:		\$110.00	
CLAIMS AND EXTENSION FEE TOTAL:		\$110.00	
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$110.00	

A check in the amount of \$110.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1-17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date April 18, 2002

By Michele M. Simkin
Reg. #41,545

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